ENTRYBLANK	
PLEASE TYPE OR PRINT	Entered previous May Show
	¥ yes □ no
☐ Ms.	
Mr. Artist GEORGE	KOBY
	(Last Name Last)
Permanent	
Address	AR ST CHAGRIN FA
Street	City
4402-2- Tel. (216)	247-5347
Zip Area Code	
Temporary or	
Studio Address	
Street	City
T.1. ( )	
Zip Area Code	
Zip Area Code	
If you do not presently live in or	ne of the counties of the
Western Reserve, which county v	were you born in?
Collaborator	
(If Any)	
If May Show entries are not acce	epted or not sold:
Artist will pick up at Museum	
☐ Museum should dispose of.	
<ul><li>Museum should ship to artis</li></ul>	t C.O.D. at this address:
One of the second	
Special Instructions	
When necessary include below in	
the object is to be assembled and	i dispiayed.
This entry blank must be fully mentry blanks will not be accepted	
Note carefully calendar for delive	
understood that the Museum wil	
its own account any objects not	
It is also understood that accente	

The submission of objects will be construed as acceptance of all

exhibition until June 4, 1978.

conditions printed in the entry information.

Signature League Koby

## ENTRY BLANKS

	<ol> <li>Paintings □ 2. Grap</li> <li>Sculpture □ 5. Elect</li> </ol>			
Materials				
CLAY				
Title 78-/				
Price or NFS	Insurance Value if NFS Only	Size 4/	8 "	
GRAPHICS AND PHOTOGRAPHY ONLY				
Additional No. For Sale	Total No. in Edition	Price Unframed	Price of Frame	
ACCEPTED DO NOT WRITE IN THIS SECTION ACCEPTED				
REJECTED	38(PP)	)	REJECTE	
	1 Deinting D 2 Com	ulaine III 2 Dhan		
	1. Paintings	ohics 🗆 3. Phot tric 🖾 6. Craft		
Materials				
04				
Title 78-2				
Price or NFS Insurance Value If NFS Only  250  Insurance Value If NFS Only		Size "/ 27×2	<i>D</i> "	
	GRAPHICS AND PHOTOGR	RAPHY ONLY		
Additional No. Fo	r Sale Total No. in Edition	Price Unframed	Price of Frame	
ACCEPTED	DO NOT WRITE IN	ACCEPTED	RECEIVED	
X	THIS SECTION	X		
REJECTED	201-1	REJECTED	DATE	